

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 07, 2022
Secretary of State
5249214217CC**Entity Name:** LAKEVIEW II AT SUMMERWIND CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O TROPICAL ISLES MANAGEMENT SERVICES
12734 KENWOOD LN STE 49
FT. MYERS, FL 33907**Current Mailing Address:**C/O TROPICAL ISLES MANAGEMENT SERVICES
12734 KENWOOD LN STE 49
FT. MYERS, FL 33907**FEI Number: 51-0524720****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**TROPICAL ISLES MANAGEMENT
12734 KENWOOD LANE
SUITE 49
FT. MYERS, FL 33907 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	DRISCOLL, STEVE
Address	C/O TROPICAL ISLES MANAGEMENT SERVICES 12734 KENWOOD LN STE 49
City-State-Zip:	FT. MYERS FL 33907

Title	VP
Name	GEIGER, DAVID
Address	C/O TROPICAL ISLES MANAGEMENT SERVICES 12734 KENWOOD LN STE 49
City-State-Zip:	FT. MYERS FL 33907

Title	ST
Name	GEIGER, MICHAEL
Address	C/O TROPICAL ISLES MANAGEMENT SERVICES 12734 KENWOOD LN STE 49
City-State-Zip:	FT. MYERS FL 33907

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: STEVE DRISCOLL**PRESIDENT****03/07/2022**

Electronic Signature of Signing Officer/Director Detail

Date